

Boston Alliance *for*  
Community Health

CONVENING, ALIGNING, ENGAGING, AND  
SUSTAINING FOR IMPACT: BACH  
STRATEGIES FOR MAKING BOSTON A  
HEALTHY AND EQUITABLE CITY

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BOSTON ALLIANCE FOR COMMUNITY HEALTH [www.bostonalliance.org](http://www.bostonalliance.org)

# CONVENING, ALIGNING, ENGAGING, and Sustaining FOR IMPACT: BACH STRATEGIES FOR MAKING BOSTON A HEALTHY AND EQUITABLE CITY

## BACH's Strategies (2017-2019)

### EXECUTIVE SUMMARY

The Boston Alliance for Community Health (BACH) was formed in the early 1990's with the intention of "driving health planning and improvement to the local level." As Boston's Community Health Network Area, BACH began as a group of dedicated grass roots neighborhood coalitions who, with small grants funded by area hospitals, implemented direct service programs to improve residents' health. In 2009-10, BACH created a strategic plan that set out a bold set of goals which included implementing a neighborhood-based city-wide health improvement planning process for Boston, which engaged over 80 organizations and over 2,000 individuals. This plan was completed in 2014 and has become the core of Boston's Community Health Improvement Plan (CHIP). The vision of the CHIP is:

***A Boston that is vibrant, just, and equitable, where all people who live, work, play, pray, and learn here have optimal health and well-being and enjoy a supportive environment and a sense of safety and belonging- regardless of who they are, what neighborhood they live in, or where they come from.***

The CHIP identified five strategic issues:

**PRIORITY ISSUE #1: How can we achieve racial and ethnic health equity?**

**PRIORITY ISSUE #2: How can we improve coordination and integration of healthcare and community-based prevention services and activities?**

**PRIORITY ISSUE #3: How can we build and increase resilience in communities impacted by trauma?**

**PRIORITY ISSUE #4: How can we improve health outcomes by focusing on education, employment, and transportation policies and practices?**

**PRIORITY ISSUE #5: How can we increase the number of immigrants, people of color, and other underrepresented populations in leadership roles and decision-making processes?**

The CHIP gives an opportunity for a wide range of organizations, initiatives, and residents to contribute their skills, resources, services, and perspectives in addressing these five issues. It is not BACH's strategic plan. However, BACH, which is now a cross-sector alliance whose members, in addition to neighborhood coalitions, include hospitals, health centers, community development and other community-based organizations and residents now has the opportunity to build on its past work and define its roles and value in helping us all address these issues and improve the health of Bostonians. Therefore, we have developed the BACH Strategic Plan for 2017-19.

Our strategic plan is based on BACH and its members' skill sets, resources, and a set of values and principles that guide our work. They include:

- Social determinants of health, particularly racism, are major causes of population health inequities and must be addressed in order to achieve lasting change.
- The most sustainable changes are those that community residents have been involved in identifying and making.
- The Policy, Systems, and Environment approach to change can have the broadest impact. It complements rather than replaces direct care and services to individual and families.

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- Every public and private sector partner including, business, government, faith-based groups, educational and research institutions, needs to participate and align their efforts to make and support these changes if they are to be successful.

### Strategies and Goals for BACH 2017-2019

Mission Statement:

***“BACH’s mission is to improve the health and address social determinants of health of Boston’s most vulnerable populations and to achieve racial and ethnic health equity.***

***We do this by aligning the efforts of government, organizations, and residents through data-driven planning, influencing policy-making, community engagement, and resource allocations in order to achieve the greatest collective impact.”***

#### STRATEGY I:

##### **Convening:**

*Influence multi-sector policy, systems, and environment changes to make Boston a healthy and equitable city for people of all ages*

Boston has the highest wealth gap and inequities of any American city. There is well-established evidence that the social determinants of health such as education, employment, housing, and transportation have a profound effect on the health outcomes of residents. We believe that these inequities are maintained by structural racism in the institutions of government and private entities. While there are many advocacy efforts to address these inequities, there are few resident-driven, organized efforts that focus on improving these social determinants and connecting them to better health throughout the life-span.

Over the past few years, funded by the federal Centers for Disease Control and Prevention, in partnership with the Boston Public Health Commission, BACH and its community partners have recruited, trained and supported a cadre of residents (Health Community Champions) who have been working on influencing policy, systems, and environmental changes related to three of the major causes of chronic disease: smoke-free housing, access to healthy food and beverages, and increased bicycling and walking opportunities. As federal funding ends for this initiative in 2017, we want to leverage the enthusiasm and passion for health of these champions to develop a policy and systems change agenda that reflects their priorities for a healthy and equitable Boston. We want institutional power to be shared with the community members most affected and create an effective community health advocacy voice that can complement other organizational efforts.

**BACH GOALS:** In the next 3 years, we will:

1. Develop a resident-driven healthy and age-friendly community policy and advocacy agenda with specific objectives in 2017;
2. Redesign and transition Healthy Community Champions (HCC) program to non-Federal funding in 2017 in order to increase the value of BACH as one of the authentic, community-based voices for an equitable, healthy, and age-friendly Boston;

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3. Activate the HCCs through neighborhood coalitions and other community-based organizations.
4. Assist HCCs and other community health advocates to serve on hospital, health centers, and other organizational Community Advisory Boards and Boards of Directors.
5. Participate in developing and supporting the policy agendas of key partners (2017-2019, including but not limited to:
  - Age-Friendly Boston
  - Alternatives for Community and Environment
  - Boston Advancing Racial Equity (BARE)
  - Fight for 15
  - Jobs NOT Jails
  - Massachusetts Association of Community Development Corporations
  - Massachusetts Public Health Association
  - Metropolitan Area Planning Council
  - Others

### **STRATEGY II**

#### **Aligning for Impact:**

##### *Aligning the health improvement efforts of government, organizations, and residents through data-driven planning*

In 2007, The Boston Foundation published its report, The Boston Paradox: Lots of Health Care, Not Enough Health, in which they stated, “Despite its status as a world-class healthcare hub with unparalleled assets—universities, teaching hospitals and research facilities routinely hailed as setting a global gold standard—a rising tide of preventable chronic disease threatens not only the physical health of Greater Boston residents but is already beginning to crowd out public and private investment in a wide range of regional priorities — including healthcare itself.”

In 2010, the Patient Protection and Affordable Care Act was enacted. It requires all not-for-profit hospitals and federally-qualified health centers to conduct a Community Health Needs Assessment every three years. A tremendous amount of time, money, and effort goes into these triennial projects. While Boston hospitals have made some initial steps in collaborating on these assessments there continues to be 12 hospital assessments and 8 health center assessments each cycle. Increasingly, under new payment models, hospitals are responsible and at financial risk for the health of their entire patient panel so are increasing their investments in community interventions.

From 2012 to 2014, BACH and its community partners and the Boston Public Health Commission conducted an inclusive community health assessment process which resulted in Boston’s CHIP which identifies five strategic issues to be addressed (see above).

Nearly a decade after the Boston Foundation report, Boston’s residents continue to have shockingly poor health outcomes, particularly poor and racial and ethnic communities. Despite being “resource-rich” Boston remains “coordination-poor.” There is no coordinated health planning and improvement group in which clinical providers, community groups, residents, and the health department align,

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coordinate, and measure their health improvement efforts. We believe that BACH is well-positioned to convene such an entity and with the combined resources of all of these organizations, Boston can have a stronger positive impact on the health of Boston's most vulnerable populations.

### **BACH GOALS: In the next 3 years, we will:**

1. Work with BPHC to align cross-sector efforts to implement, measure, and to help achieve the goals and objectives of the Boston Community Health Improvement Plan (CHIP) by 2019;
2. Work with BPHC to establish BostonCHIP Council that has cross-sector and resident participation and, with sufficient resources;

### **STRATEGY III:**

#### **Engagement for Impact:**

##### *Influence Multi-Sector Resource Allocation and Community Impact*

Because positive, long-term health outcomes are dependent on a range of social determinants, it is essential that resources that are not traditionally seen as "health-related" are invested in ways that do, in fact, improve residents' health and reduce racial and ethnic inequities. Whether it is investments in infrastructure to make streets safer for people of all ages; work force development programs that improve the ability to earn a livable income; safe, healthy, and affordable housing for families and those with special needs; skills to cope with trauma and build community cohesion; green and recreational space that is safe for exercise, or early childhood interventions in community and school settings, all of these resources need to be leveraged to improve individual and population health.

Each year, we learn more about what contributes to a healthy city for people of all ages. Our understanding of the environment in which we live and the ways in which physical, mental, and spiritual dimensions interact grows. Many publically-funded services sit within complex bureaucracies that make innovation and exploration of new approaches to health difficult to initiate and implement. As an independent group, BACH is in a good position to try new models of cross-neighborhood interventions that build the capacity of residents, community-based organizations from many sectors, and coalitions to be effective change agents. The learning that comes from these new approaches can provide alternative paths to increased skills, community cohesion, and individual and group empowerment.

### **GOALS: In the next 3 years, we will:**

1. Be a strong community voice to assure that Determination of Need's Community Health Initiatives and other additional community benefits investments maximize community engagement and will be aligned with Boston CHIP/MAPP, MDPH Priorities, hospital CHNA, reflect community input, and address social determinants of health and health equity and disseminate funding information to community organizations and residents;
2. Develop "demonstration" cross-neighborhood projects (such as the HCC program) that include community coalitions and multiple community-based organizations, including senior serving organizations and helps build their capacity to advocate for healthy, equitable, and age-friendly community improvements.

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3. Provide small “incentive” grants, technical assistance, and a range of learning opportunities to residents and community-based organizations (2017-2019)
4. In partnership with other organizations, develop and leverage cross-sector investments between health and community development that increase the investments in social determinants of health.

### STRATEGY IV

#### **Sustaining for Impact**

##### *Build a multi-year sustainable infrastructure for BACH*

As the funding environment changes, it is essential that BACH create a sustainable infrastructure that provides sufficient financial and human resources to achieve its programmatic goals. In the past, BACH has relied on Determination of Need (DoN) Community Health Initiative (CHI) funding to support its core infrastructure. As the DoN/CHI process changes there will be increased competition for DoN funds and the DoN commitment to supporting Community Health Network Areas may lessen.

**GOALS:** In the next 3 years, we will:

1. Diversify our funding base by seeking foundation and corporate grants, and government grants and contracts.
2. Continue our Memorandum of Agreement with Health Resources in Action which provides a cost-effective and expertise-rich environment for staff and BACH members.
3. Reconfigure BACH’s governance and committee structure and build a diverse volunteer and leadership pipeline to best support the goals of this strategic plan.
4. Develop and implement an interactive communications plan that will increase our connections to a wide range of stakeholders in order to increase BACH’s added value to their work.

**For comments and questions, please contact BACH’s Director**

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